

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Shane Davis

Plaintiff,

vs.

M. Sayre ET AL;

Defendant.

CV

08

2255

CASE NO. _____

PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS

TEH

(PR)

E-filing

I, Shane Davis, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No X

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

If the answer is "no," state the date of last employment and the amount of the gross and net salary

PRIS. APPLIC. TO PROC. IN FORMA

PAUPERIS, Case No. _____

1 and wages per month which you received. (If you are imprisoned, specify the last place of
 2 employment prior to imprisonment.)

3 Connor masonry

4
 5
 6 2. Have you received, within the past twelve (12) months, any money from any of the following
 7 sources:

- 8 a. Business, Profession or Yes ___ No X
 9 self employment
 10 b. Income from stocks, bonds, Yes ___ No X
 11 or royalties?
 12 c. Rent payments? Yes ___ No X
 13 d. Pensions, annuities, or Yes ___ No X
 14 life insurance payments?
 15 e. Federal or State welfare payments, Yes ___ No X
 16 Social Security or other govern-
 17 ment source?

18 If the answer is "yes" to any of the above, describe each source of money and state the amount
 19 received from each.

20
 21
 22 3. Are you married? Yes ___ No X

23 Spouse's Full Name: _____

24 Spouse's Place of Employment: _____

25 Spouse's Monthly Salary, Wages or Income:

26 Gross \$ _____ Net \$ _____

27 4. a. List amount you contribute to your spouse's support : \$ _____

28 b. List the persons other than your spouse who are dependent upon you for support
 PRIS. APPLIC. TO PROC. IN FORMA

and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

5. Do you own or are you buying a home? Yes ___ No ☒

Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6. Do you own an automobile? Yes ___ No ☒

Make _____ Year _____ Model _____

Is it financed? Yes ___ No ___ If so, Total due: \$ _____

Monthly Payment: \$ _____

7. Do you have a bank account? Yes ___ No ☒ (Do not include account numbers.)

Name(s) and address(es) of bank: _____

Present balance(s): \$ _____

Do you own any cash? Yes ___ No ☒ Amount: \$ _____

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ___ No ☒

8. What are your monthly expenses?

Rent: \$ _____ Utilities: _____

Food: \$ _____ Clothing: _____

Charge Accounts:

<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

9. Do you have any other debts? (List current obligations, indicating amounts and to whom

they are payable. Do not include account numbers.)

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State Restitution \$ 116.50

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ☐ No ☒

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

4/24/08 Shane Davis

DATE SIGNATURE OF APPLICANT

1 PELICAN BAY STATE PRISON
2 SECURITY HOUSING UNIT
3 UNIT D-3

Case Number: _____

4
5 CERTIFICATE OF FUNDS
6 IN
7 PRISONER'S ACCOUNT

8
9 I certify that attached hereto is a true and correct copy of the prisoner's trust account
10 statement showing transactions of Shane Davis for the last six months at
11 (prisoner's name)

12 Pelican Bay State Prison where (s)he is confined.
13 (name of institution)

14
15 I further certify that the average deposits each month to this prisoner's account for the most
16 recent 6-month period were \$ _____ and the average balance in the prisoner's
17 account each month for the most recent 6-month period was \$ _____

18
19 Dated: _____

20 _____
(Authorized officer of the institution)

Case Number: _____

CERTIFICATION OF FUNDS

IN

PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Shane Clay Davis P97170 for the last six months at Pelican Bay State Prison where he is confined.

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$16.13 and the average balance in the prisoner's account each month for the most recent 6-month period was \$27.73. (20% = \$5.55)

Dated: 4/16/08

Lam Curtis
Authorized officer of the institution



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.

ATTEST: 4-16-08

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY J. Kleppin
TRUST OFFICE

CALIFORNIA DEPARTMENT OF CORRECTIONS

PELICAN BAY STATE PRISON

INMATE TRUST ACCOUNTING SYSTEM

INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 01, 2007 THRU APR. 16, 2008

CCOUNT NUMBER : P97170

BED/CELL NUMBER: DF03L 000000116L

CCOUNT NAME : DAVIS, SHANE CLAY

ACCOUNT TYPE: I

RIVILEGE GROUP: D

TRUST ACCOUNT ACTIVITY

TRAN ATE	CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
0/01/2007		BEGINNING BALANCE					40.50
0/02	FC05	DRAW-FAC 5	1552 D-3			39.65	0.85
0/18	W502	POSTAGE CHARG	1822			0.02	0.83
0/19	W502	POSTAGE CHARG	1848			0.02	0.81
0/19	W502	POSTAGE CHARG	1848			0.02	0.79
0/22	W502	POSTAGE CHARG	1864			0.02	0.77
0/22	W502	POSTAGE CHARG	1867			0.02	0.75
0/22	W502	POSTAGE CHARG	1867			0.41	0.34
0/22	W502	POSTAGE CHARG	1867			0.02	0.32
1/05	W502	POSTAGE CHARG	2068			0.02	0.30
2/13	W502	POSTAGE CHARG	2560			0.02	0.28
2/13	W502	POSTAGE CHARG	2560			0.02	0.26
2/17	*DD30	CASH DEPOSIT	2586 #116		18.00		18.26
2/18	W513	MISC. CHARGES	2612			0.60	17.66
2/31	*DD30	CASH DEPOSIT	2749 #126		11.25		28.91
ACTIVITY FOR 2008							
1/02	W516	LEGAL COPY CH	2773			2.60	26.31
1/09	W502	POSTAGE CHARG	2916			0.41	25.90
1/09	W502	POSTAGE CHARG	2916			0.41	25.49
1/09	W502	POSTAGE CHARG	2916			0.41	25.08
1/10	*DD30	CASH DEPOSIT	2921 #134		18.00		43.08
1/15	W516	LEGAL COPY CH	3013			0.40	42.68
1/17	W512	LEGAL POSTAGE	3067			2.16	40.52
1/17	W512	LEGAL POSTAGE	3067			1.31	39.21
1/17	W516	LEGAL COPY CH	3066			10.90	28.31
1/18	W415	CASH WITHDRAW	3070 CKREQ 283149539			13.00	15.31
1/22	W502	POSTAGE CHARG	3133			0.02	15.29
2/04	FC05	DRAW-FAC 5	3361 D-3			15.29	0.00
2/19	*DD30	CASH DEPOSIT	3610 ML159		4.50		4.50
2/21	W502	POSTAGE CHARG	3661			0.41	4.09
3/04	*DD30	CASH DEPOSIT	3839 #170		45.00		49.09
3/06	W502	POSTAGE CHARG	3927			0.26	48.83
3/06	W502	POSTAGE CHARG	3927			0.41	48.42
3/06	W502	POSTAGE CHARG	3927			0.97	47.45
3/14	W516	LEGAL COPY CH	4044			0.60	46.85
4/01	W502	POSTAGE CHARG	4241			0.41	46.44
4/02	FC05	DRAW-FAC 5	4274 D-3			45.00	1.44



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BY J. Kleppin
TRUST OFFICE

PELICAN BAY STATE PRISON
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 01, 2007 THRU APR. 16, 2008

ICT: P97170

ACCT NAME: DAVIS, SHANE CLAY

ACCT TYPE: I

* RESTITUTION ACCOUNT ACTIVITY

ATE SENTENCED: 06/14/00

COUNTY CODE: ORA

CASE NUMBER: 00NF1105

FINE AMOUNT: \$ 200.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
0/01/2007		BEGINNING BALANCE		24.00
2/17/07	DR30	REST DED-CASH DEPOSIT	20.00-	4.00
2/31/07	DR30	REST DED-CASH DEPOSIT	4.00-	0.00

* RESTITUTION ACCOUNT ACTIVITY

ATE SENTENCED: 10/10/00

COUNTY CODE: ORA

CASE NUMBER: 00NF0275

FINE AMOUNT: \$ 200.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
0/01/2007		BEGINNING BALANCE		200.00
2/31/07	DR30	REST DED-CASH DEPOSIT	8.50-	191.50
1/10/08	DR30	REST DED-CASH DEPOSIT	20.00-	171.50
2/19/08	DR30	REST DED-CASH DEPOSIT	5.00-	166.50
3/04/08	DR30	REST DED-CASH DEPOSIT	50.00-	116.50

* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT *
* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. *

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
40.50	96.75	135.81	1.44	0.00	0.00



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ATTEST: 4-16-08

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY

J. Klappin
TRUST OFFICE

CURRENT
AVAILABLE
BALANCE

1.44